

FACSIMILE COVER SHEET

610 Newport Center Drive, Suite 330 ◆ Newport Beach, California 92660 ◆ Telephone: (949) 718-6780 ◆ Fax: (949) 718-6799 To: Examiner R. Kearney Fax Telephone #: 703-305-3580 USPTO - Group 3739 Office Telephone #: Date: April 5, 2000 From: Theodore P. Lopez Date Sent; Subject: U.S. Patent Application Serial No. 09/053,346 Time Sent: Client/File: M-7584 US Fax Operator: FAX REGFIVED This transmittal consists of 9 page(s), including this cover sheet. APR 0.5' 2000 GROUP 3700 Message: Certification of Facsimile Transmission I hereby certify that this paper is being facsimile transmitted to the Patent and Trademark Office on the date shown below. Theodore P. Lopez Type or print name of person signing certification Signature Please confirm receipt of postcard by return facsimile to the letterhead facsimile number. 619187 vj If you do not receive all pages, please call (949) 718-6780. THE INFORMATION CONTAINED IN THIS FACSIMILE MESSAGE IS INTENDED ONLY FOR THE PERSONAL AND CONFIDEN

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Docket No.: M-7584 US

April 5, 2000

Assistant Commissioner For Patents Washington D.C. 20231

Re:

Applicant(s):

Rogone. Mary S.; Webber, II, Austin J.

Assignee:

Small Beginnings, inc.

Title:

Thermal And Humidity Barrier For Extremely Premature Infants

Serial No.:

09/053,346

Filed:

04/01/98

Examiner: Docket No.: R. Kearney M-7584 US Group Art Unit: 3739

Dear Sir:

Transmitted herewith are the following documents in the above-identified application:

(1)Return Receipt Postcard;

(2) This Transmittal Letter (in duplicate); APR 05 2000

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(3) Supplemental Response to Office Action (7 pgs.);

GROUP 3700

No additional fee is required;

The fee has been calculated as shown below;

CLAIMS AS AMENDED (FEES COMPUTED UNDER 37 CFR §1.9(F))

	Claims Remaining After Amendment		Highest No. Previously Paid For		Present Extra		Rate		Additional Fee
Total Claims	17	Minus	20	=	0	ж	\$ 9.00	\$	0.00
Iudependent Claims	6	Minus	5	=	0	x	\$39.00	\$	39.00
Fee of for the first filing of one or more multiple dependent claims per application.								\$	
Fee for Request for Extension of Time								\$	•
Total additional fee for this Amendment. Conditional Petition for Extension of Time: If an extension of time is required for timely filing of the enclosed document(s) after all papers filed with this transmittal								\$	39.00
have been considered, an extension of time is hereby requested: Please charge our Deposit Account No. 19-2386 in the amount of: Also, charge any additional fees required and credit any overpayment to our Deposit Account No. 19-2386.								۱\$	<u>39.00</u>
							Total:	, \$	_39.00

I hereby certify that this correspondence is being transmitted via facsimile to: Commissioner of Patents and Trademarks, Washington, D.C. 20231, on

(703) 105-35BO.

Attorney for Applican

Date of Signature

Respectfully submitted,

Attorney for A

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